Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

169.2024

. CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			00	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			NO				F	RATE	FEE	OR il [RATE	
FOR			NUMBER FILED		NUME	BER EXTRA	В	ASIC FEE	355.00	OR		710.00
TOTAL CHARGEABLE CLAIMS			minus 20=		. 60		t	X\$ 9=		OR	X\$18=	1080
INDEPENDENT CLAIMS			// _a mii	nus 3 =		. 13		X40=			X80=	1040
ML	ILTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=	1000
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				L	TOTAL		OR	TOTAL	1 R ≥ 2
CLAIMS AS AMENDED - PART II								IOIAL (JON	OTHER	THAN
(Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· \$82	Minus		I	= 58		X\$ 9=		OR	X\$18=	1044
	Independent	dependent *		S CLAIM	= 15		X40=		OR	X80=	1200	
T TREADING OF MICE IN ELECTION COMMITTEE DE L'ADDING CENTRE								+135=		OR	+270=	
							<u>L</u>	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	1244,00
		(Column 1)		(Colur	mn 2)	(Column 3)	٨١	יטוו. רבב ע			ADDIT: 1 C.E.	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CLAINA	=		X40=		OR	X80=	
L	TINOT FRESE	NTATION OF INC	DETIPLE DEP	ENDEN	CLAIM			+135=		OR	+270=	
							AD.	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	3					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	F.CL AIN	<u> -</u>		X40=		OR	X80=	
<u>L</u>	I LINOT PHESE	NTATION OF MI	JETTPLE DEF	ENDEN	CLAIM			+135=		OR	+270=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										TOTAL	
***	If the "Highest Nu	mber Previously Pa nber Previously Pa	aid For" IN THI	S SPACE i	is less tha	an 3, enter "3."	AU	DIT. FEE <u>L</u> t in the app	ropriate box		ADDIT. FEE l lumn 1.	